

10/548404

JC17 Rec'd PCT/PTO 08 SEP 2005

Application Data Sheet

Application Information

Application number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?: YES
Computer Readable Form (CRF)?:: YES
Number of copies of CRF:: 1
Title:: DIAGNOSTICS AND THERAPEUTICS FOR
DISEASES ASSOCIATED WITH
PHOSPHODIESTERASE IB (PDE1B)
Attorney Docket Number:: 004974.01065
Request for Early Publication?: NO
Request for Non-Publication?: NO
Suggested Drawing Figure:: 0
Total Drawing Sheets:: 2
Small Entity?:
Latin name::
Variety denomination name::
Petition included?: NO
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?: NO

Applicant Information

| | |
|-----------------------------------------|-------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full Capacity |
| Given Name:: | Stefan |
| Middle Name:: | |
| Family Name:: | GOLZ |
| Name Suffix:: | |
| City of Residence:: | Essen |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | Buckmannsmuhle 46 |
| City of mailing address:: | Essen |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | 45326 |

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|----------------------------------|---------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full Capacity |
| Given Name:: | Ulf |
| Middle Name:: | |
| Family Name:: | BRUGGEMEIER |
| Name Suffix:: | |
| City of Residence:: | Leichlingen |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | Leysiefen 20 |
| City of mailing address:: | Leichlingen |

State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: 42799

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Andreas
Middle Name::
Family Name:: GEERTS
Name Suffix::
City of Residence:: Wuppertal
State or Province of Residence::
Country of Residence:: DE
Street of mailing address:: Schuckertstr. 29
City of mailing address:: Wuppertal
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: 42113

Correspondence Information

Correspondence Customer Number:: 22907

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|-------------------|----------------------|----------------------|
| This Application | National Stage of | PCT/EP2004/002065 | 27 February 2004 |
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Foreign Priority Information

| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| EUROPE | 03005386.2 | 13 March 2003 | YES |
| | | | |
| | | | |

Assignee Information

Assignee name:: BAYER HEALTHCARE AG
Street of mailing address::
City of mailing address:: Leverkusen
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: D-51368